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PATENT APPLICATION FEE DETERMINATION RECORD						Application or Docket Number 09/934713			
Substitute for Form PTO-875									
CLAIMS AS FILED - PART I									
(Column 1)		(Column 2)		SMALL ENTITY		OR OTHER THAN SMALL ENTITY			
FOR	NUMBER FILED	NUMBER EXTRA		RATE	FEE	RATE	FEE		
BASIC FEE (37 CFR 1.16(a))					\$		\$		
TOTAL CLAIMS (37 CFR 1.16(c))									
INDEPENDENT CLAIMS (37 CFR 1.16(b))									
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))									
* If the difference in column 1 is less than zero, enter "0" in column 2.				TOTAL		TOTAL			
CLAIMS AS AMENDED - PART II									
(Column 1)		(Column 2)		(Column 3)		SMALL ENTITY		OR OTHER THAN SMALL ENTITY	
AMENDMENT A	7/9/03	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE	
Total (37 CFR 1.16(c))		11	Minus	20					
Independent (37 CFR 1.16(b))		4	Minus	3					
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))									
AMENDMENT B		12/1/03		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA	
Total (37 CFR 1.16(c))		11		Minus		20			
Independent (37 CFR 1.16(b))		4		Minus		4			
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))									
AMENDMENT C		6/25/04		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA	
Total (37 CFR 1.16(c))		11		Minus		20			
Independent (37 CFR 1.16(b))		5		Minus		4			
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))									

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875						Application or Docket Number 09/934713	
CLAIMS AS FILED - PART I (Column 1) (Column 2)							
FOR	NUMBER FILED	NUMBER EXTRA			SMALL ENTITY	OR	OTHER THAN SMALL ENTITY
BASIC FEE (37 CFR 1.16(a))					RATE	FEE	
TOTAL CLAIMS (37 CFR 1.16(c))	minus 20 =	*			X \$ ____ =		RATE
INDEPENDENT CLAIMS (37 CFR 1.16(b))	minus 3 =	*			X \$ ____ =		FEE
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))					+ \$ ____ =		
					TOTAL		TOTAL
* If the difference in column 1 is less than zero, enter "0" in column 2.							
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							
AMENDMENT A	12/3/04	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		
	Total (37 CFR 1.16(c))	11	Minus	20	=	RATE	ADDITIONAL FEE
	Independent (37 CFR 1.16(b))	5	Minus	5	=	X \$ ____ =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					X \$ ____ =	
						+ \$ ____ =	
					TOTAL ADD'L FEE		TOTAL ADD'L FEE
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		
	Total (37 CFR 1.16(c))	*	Minus	**	=	RATE	ADDITIONAL FEE
	Independent (37 CFR 1.16(b))	*	Minus	***	=	X \$ ____ =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					X \$ ____ =	
						+ \$ ____ =	
					TOTAL ADD'L FEE		TOTAL ADD'L FEE
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		
	Total (37 CFR 1.16(c))	*	Minus	**	=	RATE	ADDITIONAL FEE
	Independent (37 CFR 1.16(b))	*	Minus	***	=	X \$ ____ =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					X \$ ____ =	
						+ \$ ____ =	
					TOTAL ADD'L FEE		TOTAL ADD'L FEE

- * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
- ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
- *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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